Permit Number	TOWN OF SMYRNA - BUILDING PERMIT APPLICATION					
Street Address	Subdivision	Model	Lot#		Tax Map ID #	
Property Owner		Applicant		Builder/Contractor		
Name	Name			Name		
Address	Address			Address		
City/St/Zip	City/St/Zip			City/St/Zip		
Phone	Phone			Phone		
	Thone			Thone		
Email DESCRIPTION OF CONSTRUCTION DESCRIPTION OF CONSTRUCTION		I, the undersigned, own the referenced property or				
DESCRIPTION O	r CONSTRUCTIO	'IN			horized agent for	
				1	8	
Project Information		Total Value of Construction		Applicant	Applicant Signature Dat	
□ Comm. Bldg.□ Tenant FitoutFoundation□ Slab on G	mo do	\$				
		Office Use Only				
☐ Comm. Addition ☐ Crawl Space ☐ Comm. Renovation ☐ Basement				Office OSC Offig		
□ Sign □ Piers/Pilings		Zoning Approv	al			
☐ Multi Family (Apartment) Framing						
☐ Single Family Dwelling ☐ Wood						
□ Duplex □ Steel		Zoning District	Use	County	?	Kent
☐ Townhouse ☐ Masonry		7				New Castle
☐ Res. Addition ☐ Concrete		Setbacks				
☐ Res. Renovations Building Syste		Front		Qualify	ing Project?	
☐ Detached Accessory Structure ☐ New Plun		~				
☐ Swimming Pool/Hot Tub ☐ New HVA		Side		Co	ommercial Zoning	□Y □N
	Cert. Req'd					
	System Req'd	Rear		Zo	oning District	
Other Water		a			storic District	□Y □N
Public Public		Coverage			acant	OY ON
Building Area		Historic Distric	.49 DV		acant 2 Years	DY DN
Total Floor Area Sewer □ Public		Historic Distric	et?		ehabilitation	□Y □N □Y □N
Private		Historic Applic	eation?		enovation econstruction	
No. of Stories Heat		mistoric Applic	ation:		estoration	DY DN
Gas		100 Year Flood	Zone? □Y		eplacement	DY DN
Enclosed Parking		100 I cai Fioou	Zonc. —	—	pracement	-
Other		Panel				
No. of Bedrooms						
Please Li	ist All			Ap	proved By	Date
No. of Bathrooms Subcontractor				D-	agint #	
		FP Verified by	y <u>D</u>	Rec	ceipt #	'App - 2015 (12/12)

Subcontractors

Masonry	
Framing	
Roofing	
Siding	
Insulation	
Drywall	
Painting	
Flooring	
Electric	
Plumbing	
HVAC	
Other	